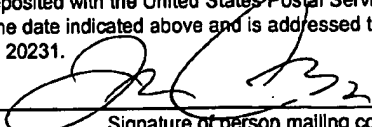


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<p>I hereby certify under 37 CFR 1.10 that this correspondence is being deposited with the United States Postal Service as "Express Mail Post Office to Addressee" with sufficient postage on the date indicated above and is addressed to: BOX PATENT APPLICATION, Commissioner for Patents, Washington, D.C. 20231.</p>	
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09614264.071200

UTILITY PATENT APPLICATION TRANSMITTAL UNDER 37 CFR §1.53(b)	
Attorney Docket Number	50036/028002
Applicant	Peter Lohse et al.
Title	C-TERMINAL PROTEIN TAGGING
PRIORITY INFORMATION:	
This application claims priority from United States provisional patent application 60/143,339, filed July 12, 1999.	
APPLICATION ELEMENTS:	
Cover sheet	1 page
Specification	16 pages
Claims	4 pages
Abstract	1 page
Drawing	12 sheets
Combined Declaration and POA, which is: <input checked="" type="checkbox"/> Unsigned; <input type="checkbox"/> Newly signed for this application; <input type="checkbox"/> A copy from prior application ["**SERIAL NUMBER**"] and the entire disclosure of the prior application is considered as being part of the disclosure of this new application and is hereby incorporated by reference therein.	3 pages
Statement Deleting Inventors	0 pages
Sequence Statement	0 pages
Sequence Listing on Paper	0 pages
Sequence Listing on Diskette	0 disk

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Small Entity Statement, which is: <input type="checkbox"/> Unsigned; <input type="checkbox"/> Newly signed for this application; <input checked="" type="checkbox"/> A copy from prior application 60/143,339, and such small entity status is still proper and desired.	1 page
Preliminary Amendment	0 pages
IDS	0 pages
Form PTO 1449	0 pages
Cited References	0 references
Recordation Form Cover Sheet and Assignment	0 pages
Assignee's Statement	0 pages
English Translation	0 pages
Certified Copy of Priority Document	0 pages
Return Receipt Postcard	1
FILING FEES:	
Basic Filing Fee: \$345	\$ 345.00
Excess Claims Fee: 31 - 20 x \$9	\$ 99.00
Excess Independent Claims Fee: 2 - 3 x \$39	
Multiple Dependent Claims Fee: \$130	
Total Fees:	\$ 444.00
<input checked="" type="checkbox"/> Enclosed is a check for \$444.00 to cover the total fees. <input type="checkbox"/> Charge ["**AMOUNT**"] to Deposit Account No. 03-2095 to cover the total fees. <input type="checkbox"/> The filing fee is not being paid at this time. <input checked="" type="checkbox"/> Please apply any other charges, or any credits, to Deposit Account No. 03-2095.	
CORRESPONDENCE ADDRESS:	
Karen L. Elbing, Ph.D. Reg. No. 35,238 Clark & Elbing LLP 176 Federal Street Boston, MA 02110 Telephone: 617-428-0200 Facsimile: 617-428-7045	
Signature 	Date <u>12 July 2000</u>